# Increasing Survivorship in Communities with an Excess Burden of Cancer

Cancer Survivorship: Embracing the Future

Cancer Survivorship among Underserved Populations

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# National Landmark Reports Highlighting Cancer Disparities Problem



### Three Major Questions

What populations have poor survival?

What are the causes of disparities in cancer survival?

How can we eliminate cancer disparities?

Freeman, Cancer, 1989

"Survival is a fundamental instinct seen in all biological forms.

Man is no exception.

But the social, political, and economic environment in which an individual or group finds itself to a large extent will determine whether one will survive as well as the quality of survival."

Disease always occurs within a context of human circumstances, including economic status, social position, culture and environment.

These human circumstances largely determine whether survival is possible as well as the quality of survival.

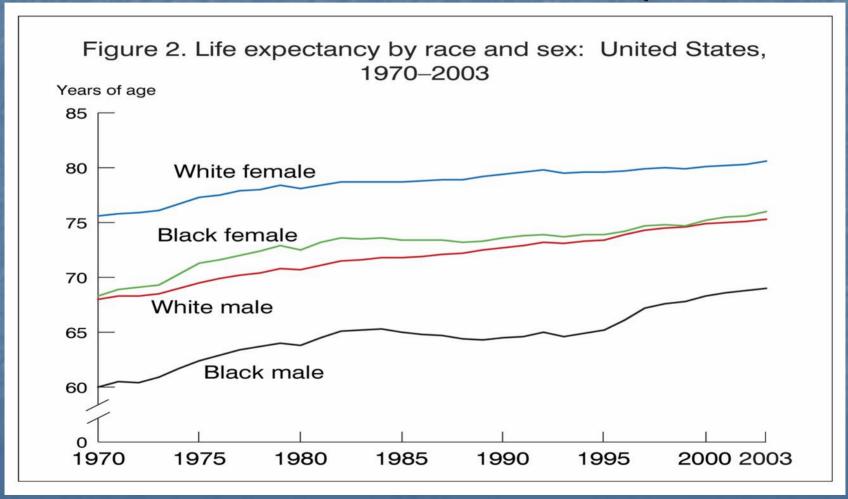
# 机会 后, 机 Risk/Crisis

Opportunity

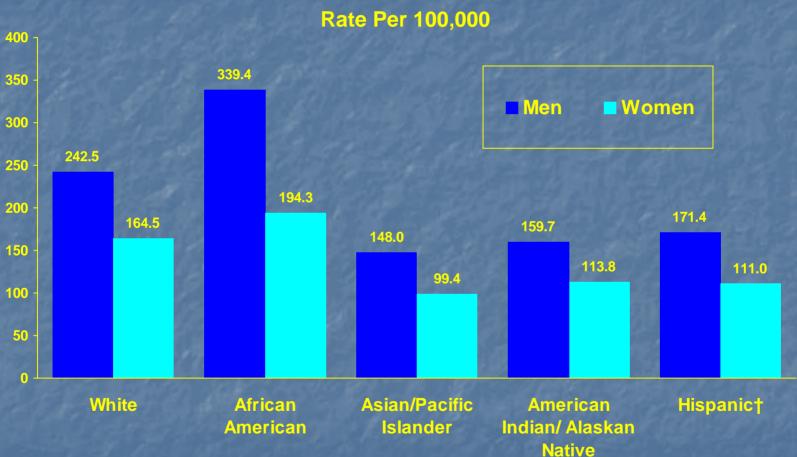
# What populations have por survival?

## Life Expectancy at Birth – USA (1970-2003)

(CDC/National Center for Health Statistics Report 2006)



## Cancer Death Rates\*, by Race and Ethnicity, US,1998-2002

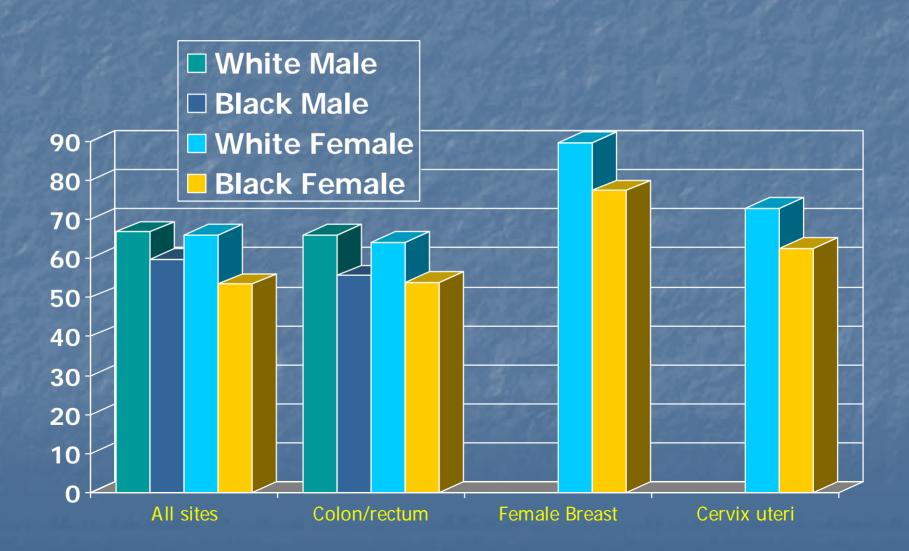


<sup>\*</sup>Per 100,000, age-adjusted to the 2000 US standard population.

Source: Surveillance, Epidemiology, and End Results Program, 1975-2002, Division of Cancer Control and Population Sciences, National Cancer Institute, 2005.

<sup>&</sup>lt;sup>†</sup>Hispanic is not mutually exclusive from whites, African Americans, Asian/Pacific Islanders, and American Indians/ Alaska Natives.

## Five-Year Relative Survival Rates, 1950-2001: SEER Cancer Statistics Review 1975-2003



The American Cancer Society estimated that with respect to Black and White differences in survival:

The survival rate of poor people with cancer is 10 to 15 percent lower than that of other Americans.

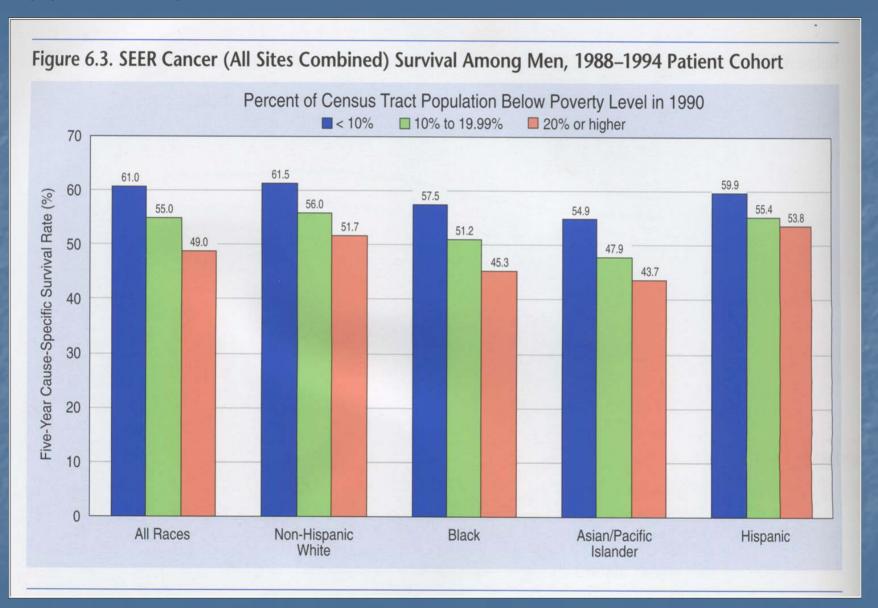
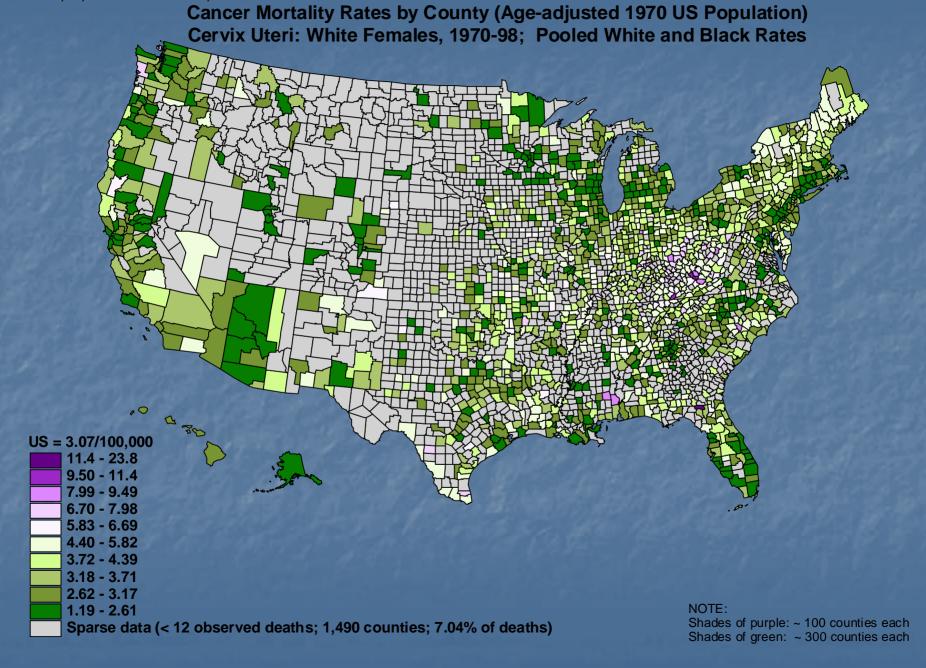
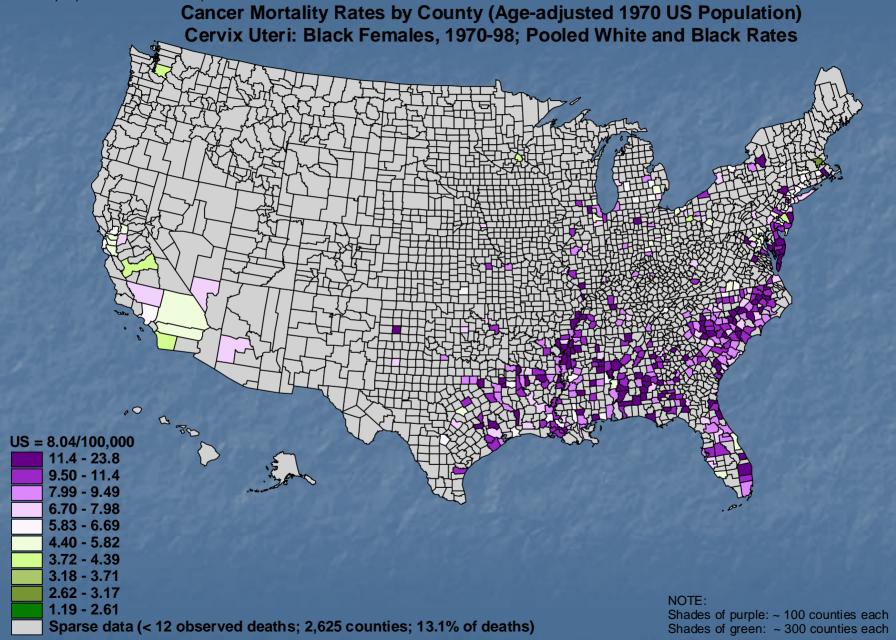


Figure 6.4. SEER Cancer (All Sites Combined) Survival Among Women, 1988-1994 Patient Cohort Percent of Census Tract Population Below Poverty Level in 1990 ■ 10% to 19.99% **<** 10% 20% or higher 70 65.8 64.7 63.4 63.3 60.7 60.8 59.6 60 58.2 58.4 58.5 Five-Year Cause-Specific Survival Rate (%) 56.1 54.5 53.1 52.0 50 47.8 30 10 All Races Non-Hispanic Asian/Pacific Black Hispanic White Islander Note: Based on data from 11 SEER registries. See "Data and Methods" for a list of SEER registries.

#### What populations have poor survival?



#### What populations have poor survival?



# What are the causes of disparities in cancer survival?

### Causes of Health Disparities

Poverty/
Low Economic
Status

**Social Injustice** 

**Culture** 

Possible Influence on Gene Environment Interaction

**Prevention** 

Early Detection

Diagnosis/ Incidence

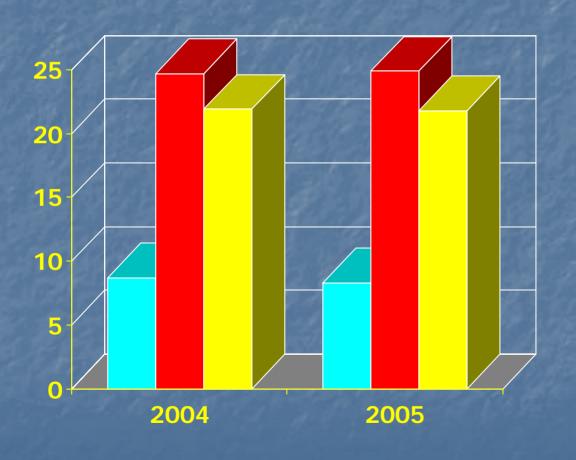
**Treatment** 

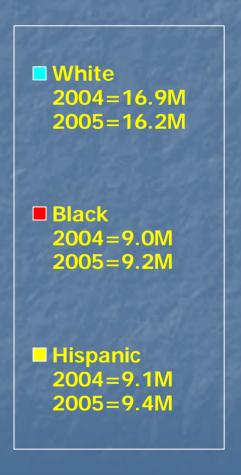
Post Treatment/ Quality of Life Survival and Mortality

What are the causes of disparities in cancer survival?

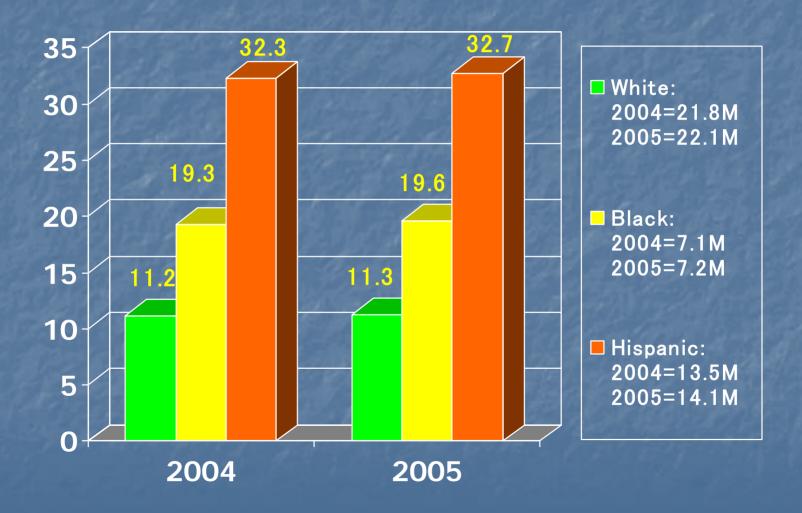
## Who are the poor?

# Poverty Rates by Race and Hispanic Origin: 2004 and 2005





#### Percent of People Without Health Insurance Coverage by Race and Hispanic Origin 2004 -2005



## The Meaning of Poverty

- Substandard housing
- Inadequate information and knowledge
- Risk-promoting lifestyles, attitudes, and behaviors
- Diminished access to health care

What are the causes of disparities in cancer survival?



CULTURE

Inadequate physical and social environment

Inadequate information and knowledge

Riskpromoting lifestyle, attitude, behavior

Diminished access to health care

#### DECREASED SURVIVAL

Freeman, H.P., 1989.

# Culture may augment or diminish poverty's expected negative effects.

# What is the meaning of race?

Who is Black?

Race Perhaps the single most defining issue in the history of American society

### **Historical Timetable**

4466		
11/11(15)		
1492	"discovered"	

1619 First African Slaves arrive in America

1776 Declaration of Independence

1857 Dred Scott Decision

1861-65 Civil War

1863 Emancipation Proclamation

1865–77 Reconstruction

1866 14th Amendment

1896 Plessy v. Ferguson

1954 Brown v. Board of Education

1960's Civil Rights Movement

In our society we see, value, and behave toward one another through a powerful lens of race. In keeping with this process, certain human conditions and characteristics were attributed to and/or imposed upon "races".

#### These include:

Economic status – ex: poverty

Culture – ex: lifestyles, attitudes, behaviors

Genetic similarities – ex: racially identified genetic makeup

Biomedical and social scientists have demonstrated that these attributed and imposed factors are not innate to racial categories.

In other words, economic status, culture, and genetics have, to a large extent, been disentangled from race.

# How can we eliminate cancer disparities?

### The Discovery-Delivery Disconnect



This *discovery to delivery* "disconnect" is a key determinant of the unequal burden of cancer.

Woices of a Broken System: Real People, Real Problems, President's Cancer Panel, Freeman,

#### The Delivery Disconnect

Delivery

Access to information and knowledge

Access to quality care

Critical Disconnect

Prevention

Early Detection

Diagnosis/ Incidence

Treatment

Post
Treatment/
Quality of Life

Survival and Mortality

### Interdisciplinary Investigation of

Health Disparities

**Biomedical Science** 

Social Justice Social Sciences & Civil & Human Rights History

Provide universal access to health care, and apply what we know at any given time to all Americans, irrespective of their ability to pay.

### At a minimum:

Ensure that populations at highest risk have access to age- and gender-appropriate screening and follow-up services for the four screenable cancers initially, and expanding as new in advances in screening become available.

Delineate and target geographically and culturally defined areas of extreme excess mortality in America and designate them as "chronic disaster areas" analogous to that given to natural disaster areas.

Target these areas with an intense approach to providing culturally relevant education, control of tobacco use, appropriate access to early diagnosis and treatment, patient navigation and other social support networks.

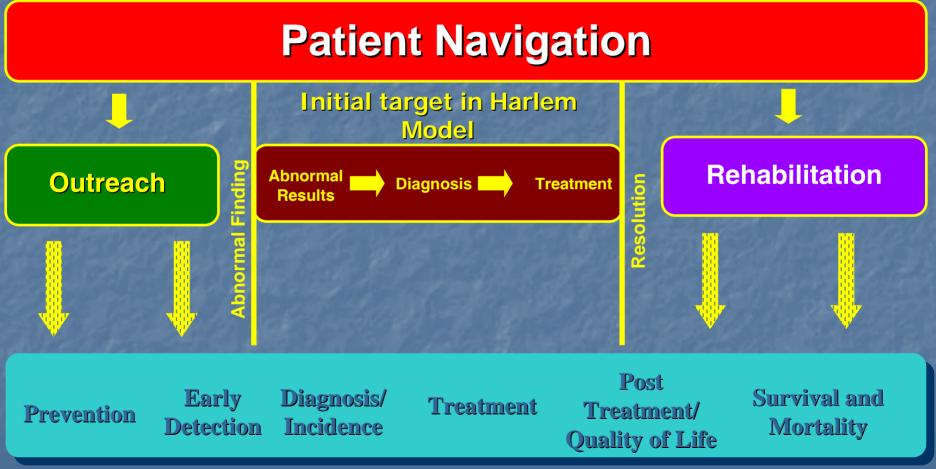
Systems for monitoring treatment equity should be established and implemented to address the existence of bias in the provision of health care.

Each individual regardless of economic status must share in the responsibility for promoting his/her own health and well being.

How can we eliminate cancer disparities?

## Augment the role of patient navigators.

## Augmenting Patient Navigation across the Health Care Continuum



Freeman, 2006.

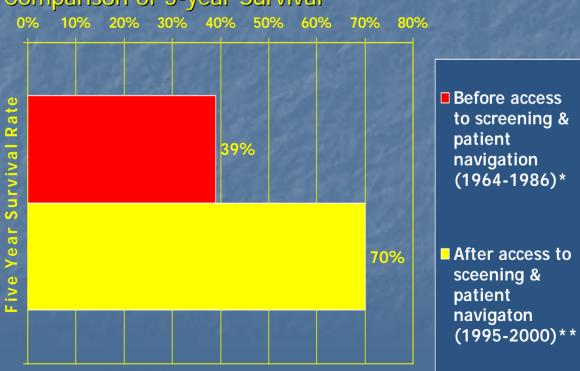
Impact of Harlem Hospital Center Breast Cancer Screening Program with Patient Navigation

#### Comparison of Stage at Diagnosis

<u>1964-1986</u>	<u>1995-2000</u>
Stage 0 0%	12%
Stage I 6%	29%
Stage II 45%	38%
Stage III 39%	14%
Stage IV 10%	7%

Oluwole/Freeman, Journal of American College of Surgeons, 2003

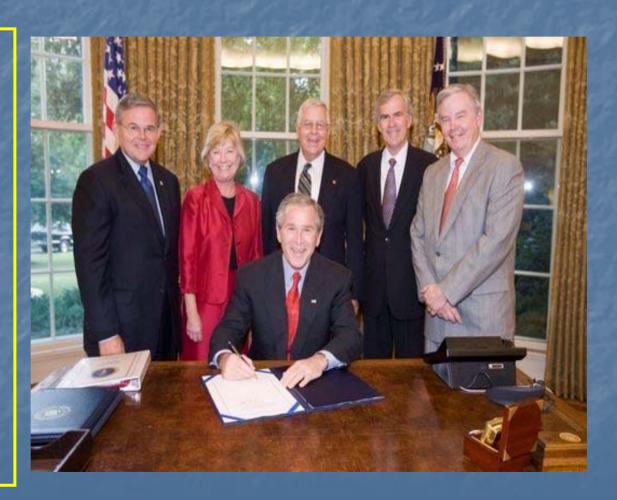
#### Comparison of 5-year Survival



<sup>\*</sup>Freeman HP, Wasfie TJ (1989). Cancer of the breast in poor black women. *Cancer*, 63(12), 2562-2569.

#### **National Legislation**

Signed into law June 29, 2005 "Patient **Navigator** Outreach and **Chronic Disease** Prevention Act of 2005" P.L. 109-18



### Final Thoughts

# The most robust measure of health disparities is who dies too soon.

In our society we see, value, and behave toward one another through a powerful lens of race. The unequal burden of disease in our society is a challenge to science and a moral and ethical dilemma for our nation.

The drive to reach Scientific Truth must be wedded to concern for

Social Justice

## There is a need for a call for Justice in the distribution of medical resources.

# Poverty should NOT be an offense which is punishable by death.

# Of all of the forms of inequality, injustice in health is the most shocking and inhumane.

Martin Luther King, Jr.